

**Washington State Department of Health  
Tobacco Prevention and Control Program**



**Strategic Plan for  
Identifying and Eliminating  
Tobacco-Related Health Disparities  
in Washington State**

**Overview**



**March 2004**

# Addressing Tobacco-Related Health Disparities

*Research shows that tobacco use among some population groups is significantly higher than for the general population. At the same time, these groups often have less access to healthcare and other resources. This results in a disproportionate occurrence of tobacco-related death and disease.*

## Creating Parity

A key to reducing tobacco-related health disparities is to create greater equality or parity in the following areas:

- Access to culturally and linguistically appropriate resources, programs, services, and materials.
- Participation in planning and decision-making processes.
- Use of community experience in planning.
- Sustained funding for programs, staff, and research.
- Partnerships between government agencies and community organizations.



Tobacco-related health disparities are influenced by many factors, including the socio-economic status, geographic location, race and ethnicity, gender, sexual orientation, or disability of a population. The history, cultural beliefs, and country of origin of many racial and ethnic communities, as well as lack of access to healthcare, also can affect tobacco-use rates. In addition, tobacco companies use political, marketing, and charitable-giving strategies to create long-term loyalty and demand for their products in these populations.

Reducing tobacco use in high-risk groups is one of the four central goals of the *Tobacco Prevention and Control Plan for Washington State* (1999). Achieving the goal requires the Washington Tobacco Prevention and Control Program to identify and eliminate tobacco-related health disparities. In 2001, the program received a \$100,000 grant from the federal Centers for Disease Control and Prevention to develop short- and long-term strategies to reach this important goal.

## Tobacco-Related Health Disparities:

**Differences in disease and death rates between high-risk communities and the general population. These differences result from increased use of tobacco and limited access to healthcare and other services.**



## **Tobacco is Not an Equal-Opportunity Killer**

Tobacco use is the leading cause of preventable death in Washington state and across the country. It is estimated that tobacco-related diseases kill 8,300 people in our state every year – more deaths than AIDS, alcohol, drug abuse, car crashes, murders, suicides, and fires combined. However, tobacco is not an equal-opportunity killer.



Tobacco use among certain socio-economic, racial, and cultural minority groups is significantly higher than for the general population. Often, these groups have less access to healthcare and other resources to prevent and treat tobacco-related disease, and are specifically targeted by tobacco industry marketing. It is a deadly combination.

The Washington State Department of Health is committed to improving the health of high-risk populations by providing information about the dangers of tobacco use and support to help tobacco users quit. We're committed to working with those most affected to make sure our efforts are sensitive to their unique needs. We must give everyone in our state an equal opportunity to resist tobacco industry marketing campaigns and stay healthy.

The *Strategic Plan for Identifying and Eliminating Tobacco-Related Health Disparities in Washington State* outlines our strategy for addressing this serious health issue, how we are approaching our work, and where we're heading with our efforts. By working hand-in-hand, we will – together – make our state a healthier place to live, work, and play.

A handwritten signature in blue ink that reads "Mary C. Selecky".

Mary C. Selecky  
Secretary of Health

## **Comprehensive Framework**

The *Strategic Plan for Identifying and Eliminating Tobacco-Related Health Disparities in Washington State* is a comprehensive framework to guide statewide efforts to improve the health of high-risk populations. The plan identifies strategies needed to prevent and reduce tobacco use and secondhand smoke exposure among these groups.

The plan describes both system- and community-driven approaches for eliminating tobacco-related health disparities. System-driven approaches are planned, implemented, and evaluated by agencies and organizations to reach a wide variety of audiences. Community-driven strategies are developed and implemented by specific populations to meet the unique historical, cultural, and other needs of their members.



# Strategies to Eliminate Disparities

## **Increase community awareness.**

high-risk populations understand the c with tobacco use and secondhand smo

- Supporting community efforts to and community-based campaigns
- Training communities to develop public awareness strategies and m
- Educating and engaging commun elimination of tobacco-related he

## Crafting the Plan

*The Tobacco Prevention and Control Program convened the Cross Cultural Workgroup to identify innovative ways of eliminating tobacco use and exposure in high-risk communities. The workgroup included organizations from diverse populations, existing Tobacco Program activities, and community health disparities.*

**Sustain commitment.** The Tobacco Program will sustain its long-term commitment and enhance its capacity to eliminate tobacco-related health disparities by:

- Developing and integrating strategies reflected in the disparities plan within Tobacco Program activities.
- Improving the cultural sensitivity of data collection and evaluation systems, and program personnel.
- Sustaining open communication and collaboration with culturally diverse and high-risk populations.

**Members from six communities** – African American, American Indian/Alaska Native, Hispanic/Latino, and rural – conducted community assessments to better understand ongoing tobacco use and systems that might support future efforts. Assessments also identified potential barriers to prevention and cessation efforts in each community.

**The assessments were used to identify six critical issues that needed to be addressed to eliminate tobacco-related health disparities:**

- Lack of sustained funding.
- Lack of outreach and access to programs and services.
- Low priority of the tobacco issue in high-risk communities.
- Institutional racism.
- Lack of focused resources.
- Tobacco companies' targeting of high-risk communities.

**The Cross Cultural Workgroup developed three- to five-year goals to address the six critical issues and the structure for the Strategic Plan for Identifying and Eliminating Tobacco-Related Health Disparities.**

**Increase community involvement, outreach, and access.** The Tobacco Program will develop the knowledge, skills, and systems to mobilize communities and increase access to tobacco prevention and cessation services by:

- Providing funding and training to organizations within and/or serving diverse communities to help them address tobacco use in ways that are effective with individual populations.
- Providing training and support to statewide systems and programs reaching out to high-risk populations.

The Tobacco Program will help  
hazards and risks associated  
with exposure by:

• Raise awareness through media  
campaigns.

• Develop and implement effective  
messages to reduce tobacco use.

• Empower community leaders to make the  
reduction of health disparities a priority issue.

*Workgroup on Tobacco in May 2001*

*at risk populations. The workgroup*

*included health care providers, tobacco industry contractors, and others working to address*

• Native American, Asian American/Pacific Islander, Latino, sexual  
orientation, and tobacco prevention efforts, and community structures  
and barriers that might interfere with tobacco prevention

**Program will be addressed to eliminate tobacco-**

**Improve cultural sensitivity.** The Tobacco  
Program will improve the cultural appropriateness  
of its efforts by:

- Identifying, supporting, and implementing  
culturally appropriate tobacco prevention and  
cessation strategies.
- Establishing more culturally sensitive policies  
and procedures.
- Training staff and contractors to be sensitive to  
cultural differences when planning activities and  
working with diverse communities.

**Provide materials and services.** The Tobacco Program  
will address the lack of tobacco prevention and cessation  
materials and services available in various languages and  
reflecting cultural differences by:

- Working with and funding communities to develop  
appropriate materials, programs, and services.
- Training community members serving high-risk  
populations to deliver programs and services.

**Address six critical issues. These goals established  
the Tobacco Program in Washington State.**

**Reduce tobacco company influence.** The  
Tobacco Program will help high-risk populations  
resist tobacco industry marketing efforts by:

- Educating community members and leaders  
about tobacco industry tactics.
- Assessing where and how tobacco companies  
are targeting high-risk communities.
- Teaching media literacy to community  
members.



# Moving Forward

## Role of the Workgroup

With the completion of the *Strategic Plan for Identifying and Eliminating Tobacco-Related Health Disparities in Washington State*, the state Tobacco Program will establish a tobacco disparities advisory structure to guide implementation of the plan. This structure will help the program sustain ongoing communication with culturally diverse communities, program contractors, and experts working to eliminate health disparities.

## Cross Cultural Workgroup on Tobacco

American Lung Association  
BREATHE Alliance  
Center for Multicultural Health  
Commission on African American Affairs  
Confederated Tribes of the Colville Reservation  
Korean Women's Association  
My Service Mind  
Northwest Communities Education Center /  
KDNA Radio  
Northwest Parish Nurse Ministries  
Northwest Portland Area Indian  
Health Board  
Seattle Indian Health Board  
Snohomish Health District  
Tacoma Pierce County Health Department

Verbená  
Washington Association of  
Community and Migrant  
Health Centers  
Washington Asian Pacific  
Islander Families Against  
Substance Abuse



## Maximizing Resources

To prevent duplication and maximize the impact of available resources, the Tobacco Program will encourage partnerships between its county- and school-based contractors, and the five new disparities contractors. Collaboration between all of the program's contractors will help ensure that resources are used effectively to address tobacco-related disparities.

## Assessment

The Tobacco Program has begun gathering data on high-risk populations in more culturally appropriate and inclusive ways. This data will complement or expand on information previously collected by the program. These improvements in data collection will help better describe the burden of tobacco use and the knowledge, attitudes, and behaviors related to tobacco use within these population groups.

## Evaluation

The Tobacco Program will evaluate the implementation of the *Strategic Plan for Identifying and Eliminating Tobacco-Related Health Disparities in Washington State* to ensure activities achieve desired outcomes. Evaluation will involve stakeholders to ensure that results are shared and put to work for continuous quality improvement of this effort.



## For More Information

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[www.doh.wa.gov/tobacco](http://www.doh.wa.gov/tobacco)

This document is available upon request in alternative formats.

Please call 1-800-525-0127

(for the hearing impaired, call 1-800-833-6388).

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HEALTHIER WASHINGTON